P9900069015

(Re	equestor's Name)			
(Ad	dress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
/Pu	siness Entity Nar	ma\		
(Du	isiness ⊏nuty ivar	nej		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filina Officer:	-		
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Office Use Only



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SECRETARY OF STATE
VIT AHASSEF, FI OBJECT

Caronal March

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations			
	BJECT: CG D	IRECTIONAL (Name of Corporation	BORING	INC
DOC	CUMENT NUMBER: P	990000 690	15	
The e	enclosed Resignation of Regist	ered Agent for a Corpora	tion and fee are sub-	mitted for filing
	se return all correspondence con	•		
1 11/110	and return an correspondence to	isonining with inaccor to wi	o tono wing.	
	(Name of Pers	on)	-	<u>-</u>
	·		_	
	GD RECTION AC (Name of Firm/Co	, BORING I	-NC	
	,	- **		
	8789 Comme (Address)	RCE DR		
	(Address)			
	BONITA SPRIO (City/State and Zip	NGS FL 34	f135	
	(City/State and Zip	Code)		. · ·
For fi	further information concerning	this matter, please call:		
		500	947-02	13
	(Name of Person)	at (239 (Area Code)	& Daytime Telephone	Number)
		`		,
Enclo or \$3	losed is a check made payable to 35.00 for an administratively dis	the Florida Department ssolved, voluntarily disso	of State for \$87.50 is lived or withdrawn of	for an active corporation corporation.
Amer Divis P.O. I	ling Address: endment Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Amendment Section Division of Corporation 409 E. Gaines Street Tallahassee, FL 32399	ıs	

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, <u>JESUS Dominofue</u> (Name of Registered Agent)
hereby resigns as Registered Agent for CG DIRECTIONAL BORING TWC, (Name of Corporation)
P99000069015 (Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
Jesus Domingua
(Signature of Resigning Agent) If signing on behalf of an entity:
If signing on behalf of an entity: ART AV 30 ART AV 30 TO SEE THE S
(Typed or Printed Name)
23 · · · · · · · · · · · · · · · · · · ·

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(Capacity)